

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06)							Application Number <b>09/735,099</b>		Filing Date	
							Applicant(s)			
May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
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Total Indep	1		1							
Total Depend	22		18							
Total Claims	23		19							

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Claim  
1-101  
ARE CANCELLED